## UTILITY PATENT APPLICATION

248840US2CONT Attorney Docket No.

First Inventor or Application Identifier Kazuya IWASAKI

TRANSMITTAL

(AP) for new nonprovisional applications under 37 CFR 1.53(b))

Title LCD POWER SOURCE CONTROL METHOD AND CONTROL CIRCUIT THEREOF AND IMAGE FORMING APPARATUS HAVING THE CONTROL CIRCUIT

<u> </u>									
0	See	APPLICATION ELEMENTS  MPEP chapter 600 concerning utility patent application contents	Commissioner for Patents  ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313						
1.		Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	ACCOMPANYING APPLICATION PARTS						
		(Submit an original and a duplicate to the processing)	7. Assignment Recorded at Reel/Frame: 012816/0398						
2.		Specification Total Sheets 66	8. Application Data Sheet. See 37 CFR 1.76						
			9.   37 C.F.R. §3.73(b) Statement Power of Attorney Attorney						
3.		Drawing(s) (35 U.S.C. 113) Total Sheets 11	10. ☐ English Translation Document (if applicable)						
			11. Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations						
4.		Oath or Declaration Total Pages 2	Statement (IDS)/PTO-1449  12. Preliminary Amendment						
	a.	☐ Newly executed (original or copy)	13. White Advance Serial No. Postcard						
	b.	Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	14.  Certified Copy of Priority Document(s)  (if foreign priority is claimed)						
		<ol> <li>DELETION OF INVENTOR(S)         Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).     </li> </ol>	15.  Applicant claims small entity status.  See 37 CFR 1.27						
5.		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	16. ■ Other: Request for Priority						
6.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)							
	a.	☐ Computer Readable Form (CRF)							
	b.	Specification or Sequence Listing on :							
		i.   CD-ROM or CD-R (2 copies); or	•						
		ii. 🗆 Paper							
	c.	☐ Statements verifying identity of above copies							
17.	lf a (	CONTINUING APPLICATION, check appropriate box, and suppl	y the requisite information below:						
		Continuation   Divisional   Continuation-							
F	_	application information: Examiner: NGUYEN, K. T.	Group Art Unit: 2674						
		•••	application, from which an oath or declaration is supplied under Box 4b, is						
consi	dered :		ereby incorporated by reference. The incorporation can only be relied upon						
		18. CORRESPOND	ENCE ADDRESS						
		Customer	Number						
		228							
(703) 413-3000 FACSIMILE: (703) 413-2220									
	A1-	Constant Maint	Basistantia N. Jos 500						
	Nar		Registration No.: 25,599						
Si	gnatu	re:	Date: 5/29/02						
	Nar	ne: Robert T. Pous	Registration No.: 29,099						



Docket No.

248840US2CONT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

NVENTOR(S) Kazuya IWASAKI

SERIAL NO:

**New CONT Application** 

FILING DATE: Herewith

FOR:

LCD POWER SOURCE CONTROL METHOD AND CONTROL CIRCUIT THEREOF AND IMAGE

FORMING APPARATUS HAVING THE CONTROL CIRCUIT

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA		RATE		CALCULATIONS
TOTAL CLAIMS	17 - 20 =	0	x	\$18	=	\$0.00
INDEPENDENT CLAIMS	5 - 3 =	2	х	\$86	=	\$172.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable) +					=	\$0.00
☐ LATE FILING OF DECL	+	\$130	=	\$0.00		
	\$770.00					
	NS	\$942.00				
☐ REDUCTION BY 50% F		\$0.00				
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☐ RECORDATION OF ASS	+	\$40	=	\$0.00		
				TOTA	٨L	\$942.00

☐ Ple	se charge Deposit Account No	. <u>15-0030</u> in the amount of <b>\$0.00</b>	A duplicate copy	of this sheet is enclosed.
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- ☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.
- Credit card payment form is attached to cover the filing fee in the amount of \$942.00
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Customer Number

22850

Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 05/03)

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Respectfully Submitted,

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